### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# 07047540

#### **FORM D**

1387290

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	S	Serial				
DATE RECEIVED						

15070 UNIFORM LIMITED OFFERING EXEMPTION	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Private Placement of Limited Partnership Interests of Limited Partnership Interests in Brookline Avenue D  Filing Under (Check boy(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) LHOF	omestic Fund, LA
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	PHUCESSED
Type of Filing: New Filing X Amendment	MAR 2 1 2007
A. BASIC IDENTIFICATION DATA	<del></del>
1. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	——————————————————————————————————————
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Brookline Avenue Domestic Fund, L.P.	FINANCIAL
	elephone Number (Including Area Code)
c/o Brookline Avenue Partners, L.P., 100 Crescent Court, Suite 1100, Dallas, Texas 75201	(214) 855-2460
Address of Principal Business Operations (No. and Street, City, State, Zip Code) Telephone Number (If different from Executive Offices)	
Brief Description of Business Investment Partnership	
Type of Business Organization	
Corporation	other (please specify):
business trust	
	ear
Actual or Estimated Date of Incorporation or Organization:	6 X Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: <b>DE</b>	
•	
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.  When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securit received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States regi	ies and Exchange Commission (SEC) on the earlier of the date it is
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	stored of control flatt to that address.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be signatures.	be photocopies of the manually signed copy or bear typed or printed
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any charchanges from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.	nges thereto, the information requested in Part C, and any material
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a ATTENTION	as a precondition to the claim for the exemption, a fee in the proper
Failure to file notice in the appropriate states will not result in a loss of the federal extra the appropriate federal notice will not result in a loss of an available state exerpredicated on the filing of a federal notice.	
Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a current	ntly valid OMB control number. SEC 1972 (2-97)
i.v.	RECEIVED CONTROL OF THE PROPERTY OF THE PROPER

			A. BASIC IDEN	TIFICATION DATA		
2.	Enter the information i	requested for the fo	llowing:			
x x x	Each beneficial owner issuer;	having the power	has been organized within to vote or dispose, or direct porate issuers and of corp	et the vote or disposition		e of a class of equity securities of the artnership issuers; and
X	Each general and mana		tnership issuers.			
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General Partner
	l Name (Last name first, pokline Avenue Perforn					
Bu	siness or Residence Addi	ress (Number and S	Street, City, State, Zip Codrescent Court, Suite 800,			
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ Member of the General Partner of the General Partner
М	l Name (Last name first, orano, Richard M. II	·				
			Street, City, State, Zip Codrescent Court, Suite 800,			
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	✓ Member of the General Partner Partner
Slo	l Name (Last name first, tnik, Charles B.					
			Street, City, State, Zip Cod			
_	eck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				managing ratio
Bu	siness or Residence Add	ress (Number and S	Street, City, State, Zip Cod	le)		
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				
Bu	siness or Residence Addi	ess (Number and S	Street, City, State, Zip Cod	le)		
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				
Bu	siness or Residence Addr	ress (Number and S	Street, City, State, Zip Cod	e)		
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	Name (Last name first,	if individual)				
Bu	siness or Residence Addi	ress (Number and S	Street, City, State, Zip Cod	e)		

					-	R IN	FORM	(ATIO	NARC	HT O	FFERI	NG		
1. H	as the iss	uer sold	or does	the issu	er intend	l to sell,	to non-	accredite	ed invest	ors in th	is offeri		Yes	No ⊠
2. W	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?												_	000,000
2. **	nat is th	C IIIIIIII	um mvc.	stinent t	nat wint	oc accep	nou non	ii uny m	ai vidaai	•			Φ	000,000
3. D	Does the offering permit joint ownership of a single unit:										Yes ⊠	No □		
in of re (5	securition	any cones in the with the sto be li	nmission offering SEC an sted are	or simi . If a po d/or wit associat	lar remuerson to le h a state	neration be listed or states	for soli is an as s, list the	citation sociated aname o	of purch person of the bro	asers in or agent oker or c	connect of a bro lealer. I	etly or ion with sales sker or dealer f more than five the information		
Full Na	ame (Las	t name f	irst, if in	idividua	1)									
Busine	ss or Res	sidence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					
Name	of Assoc	iated Br	oker or [	Dealer				<del></del>						
	in Which													All States
[AL]	: "All Sta [AK]	tes or (	eneck ind	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		All States
[IL]	[IN]	[/d2] [IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[IN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
(RIJ	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	(wr)	[WY]	[PR]		
Full Na	ame (Las	t name t	irst, if in	ndividua	1)	•								
Busine	ss or Res	sidence A	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	le)	<u> </u>	<del>.</del>			
Name	of Assoc	iated Bro	oker or I	Dealer										
	in Which												П	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		Till States
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	ame (Las	t name f	irst, if in	ndividua	1)									
Busine	ss or Res	sidence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)	-				
Name	of Assoc	iated Bro	oker or I	Dealer									<del> </del>	· · · ·
States	in Which	Person	Listed H	las Solic	ited or I	ntends t	o Solici	Purcha	sers					
(Check	"All Sta	ites" or o	check inc	dividual	States).		***********							All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregat Offering Pr		An	nount Already Sold
	Debt	\$0		\$	0
	Equity	<b>\$</b> 0		\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	<b>\$</b> 0		\$	0
	Partnership Interests	\$27,317,000.6	00	\$27,	317,000.00
	Other (Specify)	\$ 0		\$	0
	Total	\$27,317,000.0	00	\$ <u>27</u> ,	317,000.00
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."				
		Number Investors		Do	Aggregate ollar Amount of Purchases
	Accredited Investors	9		\$27,	317,000.00
	Non-accredited Investors	0		\$	0
	Total (for filings under Rule 504 only)	N/A		\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of offering	Type of Security		Do	ollar Amount Sold
	Rule 505	N/A		\$	N/A
	Regulation A	N/A		\$	N/A
	Rule 504	N/A		\$	N/A
	Total	N/A		\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the secur this offering. Exclude amounts relating solely to organization expenses of the issuer. The information be given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ation may an			
	Transfer Agent's Fees	******		\$	0
	Printing and Engraving Costs	******		\$	
	Legal Fees		X	\$	45,500
	Accounting Fees			\$	0
	Engineering Fees	•••••		\$	
	Sales Commissions (specify finder's fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total	**************	$\boxtimes$	\$	45,500

•	b. Enter the difference between the agg and total expenses furnished in response	regate offering price given in response to Part C-0 to Part C-Question 4.a. This difference is the "a	Question 1 djusted gross			\$ <u>27,271,500.00</u>	
5.	each of the purposes shown. If the amo	ed gross proceeds to the issuer used or proposed to unt for any purpose is not known, furnish an estin The total of the payments listed must equal the a use to Part C-Question 4.b. above.	nate and				
				Of Dire	ments to ficers, & filiates	Payments To Others	
	Salaries and fees			<b>S</b>		\$	
	Purchase of real estate			<b>s</b>		<b>s</b>	
	Purchase, rental or leasing and in-	stallation of machinery and equipment		<b>s</b>		\$ \$	
	Construction or leasing of plant b	uildings and facilities		\$			
	Acquisition of other businesses (i may be used in exchange for the a	ncluding the value of securities involved in this of assets or securities of another issuer pursuant to a	ffering that merger)	s		\$	
	Repayment of indebtedness			\$		\$	
	Working capital			\$		\$	
	Other (specify) (investments)			\$	×	\$ 27,271,500.00	
	Column Totals			\$	×	\$ <u>27,271,500.00</u>	
	Total Payments Listed (column to	tals added)	••••••		\$ <u>27,2</u>	271,500.00	
		D. FEDERAL SIGNATURE	<del>-</del>				
signa	ture constitutes an undertaking by the iss	gned by the undersigned duly authorized person. User to furnish to the U.S. Securities and Exchange -accredited investor pursuant to paragraph (b) (2)	Commission,	filed und upon wri	ler Rule 50 tten reque	05, the following st of its staff, the	
	ner (Print or Type) okline Avenue Domestic Fund, L.P.	Signature Color	Date March/2	ب <sub>2007</sub>			
	nc of Signer (Print or Type)	Title of Signer (Print or Type)					
	urles B. Slotnik	Member of the General Partner of the Gener	al Partner of th	e Issuer			
		ATTENTION omissions of fact constitute federal crimin	-1.4-1-4	(0	4011.0.0	4004)	

	E. STATE SIGNATURE								
1.	rule?	resently subject to any of the disqualification prov x, Column 5, for state response.		Yes	No ⊠				
2.	<ol> <li>The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.</li> </ol>								
3.	<ol> <li>The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.</li> </ol>								
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.								
lss	uer (Print or Type)	Signature	Date						
Bre	ookline Avenue Domestic Fund, L.P.	Chuler Statel	March /2 2007	007					
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)							
Ch	Charles B. Slotnik  Member of the General Partner of the General Partner of the Issuer								

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### **APPENDIX**

1		2	3		5			
	non-acc investor: (Par	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
AL			***************************************					
AK								
AZ								
AR								
CA		х	\$5,000,000	1	\$5,000,000	0	\$0	No
co		!						
СТ								
DE								
DC								
FL		Х	\$700,000	2	\$700,000	0	\$0	No
GA								
ні								
ID					· · · · · · · · · · · · · · · · · · ·			
īL								
IN								
IA	<u></u>					ļ		
KS								
KY								
LA								
ME								
MD								
MA								
MI								
MN				<del> </del>				
MS								
МО								

#### **APPENDIX**

1	:	2	3		5			
	Intend to sell to non-accredited investors in State (Part B-Item 1)  Type of se and aggre offering possible offered in (Part Control of Item 1)			Туре с	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	ccredited Accredited			
MT								
NE								
NV							- 1 - ··· · · · · · · · · · · · · · · ·	
NH								
NJ								
NM								
NY	1	х	\$400,000	2	\$400,000	0	\$0	No
NC								
ND					<del></del>			
ОН								
ок								
OR						· ·		
PA								
RI								
SC								
SD								
TN								
TX		X	\$21,217,000	4	\$21,217,000	0	\$0	No
UT								
VT								
VA								
WA								
wv								
WI								
WY								
PR							F	NID